



Application # _____

Harnett County Central Permitting

420 McKinney Pkwy Lillington, NC 27546

PO Box 65 Lillington, NC 27546

910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

* Must be owner/occupier or
licensed contractor. Address,
company name & phone must
match information on license.

Application for Residential Building and Trades PermitOwner's Name: DRB Homes- NC LLC Date 3/25/24Site Address: 141 Alden Way Phone 919-279-2339Subdivision: Campbell Ridge Lot 21Description of Proposed Work: New Singel Family Dwelling Total Job Cost 223,059.00**General Contractor Information**DRB Homes- NC LLC 919-279-2339

Building Contractor's Company Name Telephone

1101 Slater Rd. Ste. 300 Durham, NC 27703 amoss@drbgroup.com

Address Email Address

68937 HEATED SQ FT 2816 GARAGE SQ FT 777

License #

Electrical Contractor InformationDescription of Work New Singel Family Dwelling Service Size: 200 Amps T-Pole: ☒ Yes ☐ NoRomanoff Electric 919-848-4652

Electrical Contractor's Company Name Telephone

3006 Industrial Drive, Raleigh NC 27609 kallen@romanoffgroup.cc

Address Email Address

U12915

License #

Mechanical/HVAC Contractor InformationDescription of Work New Singel Family DwellingRomanoff HVAC 919-848-4652

Mechanical Contractor's Company Name Telephone

3006 Industrial Drive, Raleigh NC 27609 kallen@romanoffgroup.cc

Address Email Address

22375

License #

Plumbing Contractor InformationDescription of Work New Singel Family Dwelling # Baths 3C&M Plumbing 919-658-6109

Plumbing Contractor's Company Name Telephone

5427 Hwy US 117 S.Alt., Mount Olive NC 28365 cm.plumbing@ymail.com

Address Email Address

19887

License #

Insulation Contractor InformationTri-City Insulation 7204 Becky Circle, Raleigh NC 27615 919-790-9684

Insulation Contractor's Company Name & Address Telephone

***NOTE: General Contractor / owner must fill out and sign the second page of this application.**



I hereby certify that I have the authority to make necessary application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes, and the Harnett County Zoning Ordinance. I state the information on the above contractors is correct as known to me and that **by signing below I have obtained all subcontractors permission to obtain these permits** and if **any** changes occur including listed contractors, site plan, number of bedrooms, building and trade plans, Environmental Health permit changes or proposed use changes, I certify it is my responsibility to notify the Harnett County Central Permitting Department of any and all changes.

EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.

Ally Moss
Signature of Owner/Contractor/Officer(s) of Corporation

3/25/24
Date

Affidavit for Worker's Compensation N.C.G.S. 87-14

The undersigned applicant being the:

 General Contractor Owner X Officer/Agent of the Contractor or Owner

Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

 X Has three (3) or more employees and has obtained workers' compensation insurance to cover them.

 Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.

 Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.

 Has no more than two (2) employees and no subcontractors.

While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker's compensation insurance prior to issuance of the permit and at any time during the permitted work from any person, firm or corporation carrying out the work.

Sign w/Title: Ally Moss Date: 3/25/24